



PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/805,395	
	Filing Date	03/13/2001	
	First Named Inventor	H. Hansen	
	Art Unit	2645	
	Examiner Name	Ming Chow	
Total Number of Pages in This Submission	5	Attorney Docket Number	16312-P001C1X1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Transmittal Claiming Priority; Return Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Winstead Sechrest & Minter P.C.		
Signature			
Printed name	Kelly K. Kordzik		
Date	2-9-05	Reg. No.	36,571

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Toni Stanley	Date	2-9-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# APPLICATION FOR U.S. PATENT TRANSMITTAL FORM

Box PATENT APPLICATION  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Docket No.  
16312-P001US

Sir:

Transmitted herewith for filing is the patent application of:

Inventors: Harold E. A. Hanson II and Eric G. Suder

For: TELEPHONE CALL/VOICE PROCESSING SYSTEM

Enclosed are: 35 pages of Specification, including 68 claims;  
18 sheet(s) of informal drawings;

**\*Attached hereto is an added page claiming benefit of prior U.S. provisional application.**

FEE CALCULATION					SMALL ENTITY FEE			
	NUMBER				NUMBER EXTRA	RATE		FEE \$385.00
Total Claims:	68	-	20	=	48	x	\$11	= \$528.00
Independent Claims:	6	-	3	=	3	x	\$40	= \$120.00
TOTAL FILING FEE								= \$1033.00

☐ Enclosed is a check for \$ \_\_\_\_\_.

☐ Please charge any additional fees or credit any overpayment to Deposit Account No. 23-2426 (16312-P001US) in the name of Winstead Sechrest & Minick P.C. A duplicate copy of this sheet is enclosed.

Please direct all correspondence to: James J. Murphy, Esq., WINSTEAD SECHREST & MINICK P.C., 5400 Renaissance Tower, 1201 Elm Street, Dallas, Texas 75270, and direct all telephone calls to Kelly K. Kordzik, (512) 370-2851.

6/11/97  
Date

Kelly K. Kordzik  
Attorney for Applicants  
Registration No. 36,571

**ADDED PAGE FOR APPLICATION TRANSMITTAL  
WHERE BENEFIT OF PRIOR U.S. APPLICATION CLAIMED**

**1. Relate Back - 35 U.S.C. § 119(e) Priority Claim for Prior Provisional Application:**

This application claims the benefit of U.S. Provisional Application No. 60/023,749 filed June 12, 1997.

**2. Further Inventorship Statement Where Benefit of Prior Application Claimed.**

(a) ☐ This application discloses and claims only subject matter disclosed in the prior application whose particulars are set out above and the inventor(s) in this application are

☐ the same.

☐ less than those named in the prior application. It is requested that the following inventor(s) identified for the prior application be deleted:

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(b) ☒ This application discloses and claims additional disclosure by amendment and a new declaration or oath is being filed. With respect to the prior application, the inventor(s) in this application are

☒ the same.

☐ less than those named in the prior application. It is requested that the following inventor(s) identified for the prior application be deleted:

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(c) ☐ The inventorship for all the claims in this application are

☐ the same.

☐ not the same. An explanation, including the ownership of the various claims at the time the last claimed invention was made,

☐ is submitted.

☐ will be submitted.